## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In reapplication of: Masanori ASAKURA

Serial No: 10/613 655 Confirmation No: 7235 Filed: July 2, 2003

For: Image Processing Device and Image Processing

Method

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Art Unit: 2625

Examiner: Vo, Quang N.

I hereby certify that this correspondence is being transmitted via electronic filing to: Mail Stop Amendment Commissioner for Patents

P.O. Box 1450 Alexandria VA 22313-1450 September 13, 2007 Date of Deposit

Juanita Soberani Name Mejari 9/13/2007 Signature Date

Transmitted herewith in the above-identified application are the following:

Reply to the Office Action dated August 10, 2007.

No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE	
TOTAL CLAIMS FEE	20	-	20		0	LG=\$50 SM=\$25	\$50	\$	0
INDEPENDENT CLAIMS FEE	5	-	5		0	LG=\$200 SM=\$100	\$200	\$	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS  LARGE ENTITY FEE = \$380  \$MALL ENTITY FEE = \$180								\$	
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER) \$250 FOR EACH ADDITIONAL 50 SHEETS							)	\$	
Independent Claims: 1, 5, 7, 11 and 13 TOTAL								\$	0

- If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- If the "Highest Number Previously Paid for" In THIS SPACE is less than 20, write "20" in this space.

  If the "Highest Number Previously Paid for "In THIS SPACE is less than 30, write "20" in this space. The "Highest Number Previously Paid for "In THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid for "(Total or Independent) is the flighten number found from the equivalent too xor Col. 1 of prior amendment or the number of claims originally filed.
- Please charge the amount of \$\_\_\_ to cover the additional claims fee to Deposit Account No. 50-1314. Please charge the amount of \$\_\_\_ to cover the extension fee to Deposit Account No. 50-1314.
- The Commissioner is hereby authorized to charge any deficiencies of fees associated with this

By:

- communication or credit any overpayment to Deposit Account No. 50-1314. Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
  - Any patent application processing fees under 37 C.F.R. § 1.17

Date: September 13, 2007

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Respectfully submitted, HOGAN & HARTSON L.L.P.

Troy M. Schmelzer Registration No. 36,667 Attorney for Applicant(s)